| Application or Docket Number   |  |  |                |                       |                     |                  |          |                    |                        |                 |                     | ber                    |
|--|--|--|----------------|-----------------------|---------------------|------------------|----------|--------------------|------------------------|-----------------|---------------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD                              |  |  |                |                       |                     |                  |          |                    |                        |                 |                     |                        |
| Effective October 1, 2000 091722770                                      |  |  |                |                       |                     |                  |          |                    |                        |                 |                     | 70                     |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |  |                |                       |                     |                  |          | SMALL E            |                        | OR              | OTHER<br>SMALL      |                        |
| TC   | OTAL CLAIMS                                    |  | 56             |                       |                     |                  | 1        | RATE               | FEE                    | 1               | RATE                | FEE                    |
| FOR  |  |  | NUMBER FILED   |                       | NUMBER EXTRA        |                  |          | BASIC FE           | ₹ 355.00               | OR.             | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |  | 56 minus 20=   |                       | . 36                |                  |          | X\$ 9=             |                        | OR              | X\$18=              | 148                    |
| INC  | EPENDENT CI                                    | LAIMS                                      | minus 3 =      |                       | •                   |                  |          | X40=               |                        | l <sub>or</sub> | X80=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT .                                       |  |  |                |                       |                     |                  | +135=    | 1                  | OR                     | +270=           | -                   |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |  |                |                       |                     |                  | ı        | TOTAL              |                        | OR              | TOTAL               | 1358                   |
| <b>CLAIMS AS AMENDED - PART II</b>                                       |  |  |                |                       |                     |                  |          |                    |                        | -               | OTHER               | THAN                   |
| _  | (Column 1) (Column 2) (Column 3)               |  |                |                       |                     |                  |          | SMALL              | ENTITY                 | OR              | SMALL               | ENTITY                 |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT            |                | NUM<br>PREVK<br>PAID  | BER<br>OUSLY        | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |                 | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | .53  | Minus          | .5                    | 6                   | •                |          | X\$ 9=             | 1,22                   | OR              | X\$18=              | 5                      |
| ME   | Independent                                    | · /  | Minus          | •••                   |                     | <b>=</b>         | ł        | X40=               |                        | OR              | X80≠                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                |                       |                     |                  |          | .405               | <del> </del>           |                 | .270                |                        |
|  |  |  |                |                       |                     |                  |          | +135≠<br>YOTAL     | ļ                      | OR              | +270=<br>TOTAL      |                        |
|  |  |  |                |                       |                     |                  |          |                    | L                      | OR,             | ADDIT FEE           | - /                    |
| _  | 1  | (Column 1)                                 |                | (Colui                |                     | (Column 3)       |          |                    |                        |                 |                     |                        |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT            |                | NUM<br>PREVIO<br>PAID | BER<br>OUSLY        | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |                 | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | ·  | Minus          | ••                    |                     | 3                |          | X\$ 9=             |                        | OR              | X\$18=              |                        |
| AME  | Independent                                    | <u> -</u>                                  | Minus          | •••                   |                     | -                |          | X40=               |                        | OR              | X80=                |                        |
| L  | FIRST PRESE                                    | NTATION OF MU                              | JETIPLE DEF    | ENDENI                | CLAIM               |                  | '        | +135=              |                        | OR              | +270=               |                        |
| YOTAL<br>ADDIT. FEE  |  |  |                |                       |                     |                  |          |                    |                        | OR              | YOYAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |  |                |                       |                     |                  |          |                    |                        | •               | noon, 1 cc          |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER               |                | HIGH<br>NUM<br>PREVK  | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL        |                 | RATE                | ADDI-<br>TIONAL        |
| DME  | Total  | AMENDMENT                                  | Minus          | PAID                  | FUN                 | =                | <b> </b> | X\$ 9=             | FEE                    | 00              | X\$18=              | FEE                    |
| Š  | Independent                                    | •  | Minus          | ***                   |                     | =                | <b> </b> |                    |                        | OR              |                     | -                      |
| ٨  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                |                       |                     |                  |          | X40≈               |                        | OR              | X80=                |                        |
| +135= OR +270=   |  |  |                |                       |                     |                  |          |                    |                        |                 |                     |                        |
| ••   | If the "Highest Nu                             | mn 1 is less than th<br>mber Previously Pa | aid For IN THE | S SPACE               | s less that         | 20, enter "20."  | ٠ 🚡      | TOTAL<br>DDIT. FEE |                        | OR              | TOTAL<br>ADDIT, FEE | •                      |
|  |  | mber Previously Pa<br>ber Previously Pai   |                |                       |                     |                  |          |                    | oropriate box          |                 |                     |                        |